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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF MAINE	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Joshua First name Scott Middle name King Last name and Suffix (Sr., Jr., II, III)	Allison First name Marie Middle name King Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Allison Marie Pelletier			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3766	xxx-xx-8794			

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Debtor 1 **Joshua Scott King** Debtor 2 **Allison Marie King**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	93 Gamage Ave #1	If Debtor 2 lives at a different address:		
		Auburn, ME 04210 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Androscoggin			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:	Check one:		
	banki upicy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	otor 1 otor 2	Joshua Scott King Allison Marie King			Document	rage 5 or c	Case number (if know	vn)
Par	t 2:	Tell the Court About \	our Bankru	ptcy Ca	ase			
7.	Bank	chapter of the cruptcy Code you are			orief description of each, se go to the top of page 1 an			or Individuals Filing for Bankruptcy
	choo	sing to file under	■ Chapter	7				
			☐ Chapter	11				
			☐ Chapter	12				
			☐ Chapter	13				
8.	How	you will pay the fee	about order a pre-	how your If your printed	ou may pay. Typically, if yo attorney is submitting your address.	are paying the fe payment on your	e yourself, you may pay behalf, your attorney ma	ice in your local court for more details with cash, cashier's check, or money ay pay with a credit card or check with
					y the fee in installments. ee in Installments (Official F		option, sign and attach tl	he Application for Individuals to Pay
			☐ I request but is applied	est that not req	at my fee be waived (You uired to, waive your fee, ar	may request this o nd may do so only unable to pay the f	if your income is less that ee in installments). If you	g for Chapter 7. By law, a judge may, an 150% of the official poverty line that u choose this option, you must fill out file it with your petition.
9. Have you filed for ■ No.								
	bank	ruptcy within the 3 years?	☐ Yes.					
	iusi	, yours.		District		When	Case	number
				District		When		number
			1	District		When	Case	number
10.	case	iny bankruptcy s pending or being	■ No					
	not f you,	by a spouse who is iling this case with or by a business er, or by an ate?	☐ Yes.					
			ı	Debtor			Relatio	onship to you
				District		When		number, if known
				Debtor		NA/II		onship to you
				District		When	Case n	number, if known
11.		ou rent your	□ No.	Go to I	ine 12.			
	resio	ence?	Yes.	Has yo	our landlord obtained an ev	iction judgment ag	ainst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial Statem</i> bankruptcy petition.	ent About an Evict	ion Judgment Against Y	ou (Form 101A) and file it with this

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	otor 1 Joshua Scott King otor 2 Allison Marie King		Docum	Case number (if known)		
Par	Report About Any Bu	sinesses	You Own as a Sole Propri	etor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.			
		☐ Yes.	Name and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, St	ate & ZIP Code		
	it to this petition. Check the appropriate box to describe your business:					
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Brok	ser (as defined in 11 U.S.C. § 101(6))		
			☐ None of the abo	ve		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure ou a small business in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Cha	apter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and	— 103.	What is the hazard?			
identifiable hazard to public health or safety?						
	Or do you own any		If immediate attention is			
	property that needs immediate attention?		needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
				Number, Street, City, State & Zip Code		

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15. Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-20524 Doc 1 Filed 10/10/19 Entered 10/10/19 16:53:34 Desc Main Document Page 6 of 65

	otor 1 Joshua Scott Kin otor 2 Allison Marie Kin		Document	i age o e	Case number ('if known)	
Pari			eporting Purposes				
	What kind of debts do	16a.		mer debts? Con	sumer debts are define	d in 11 U.S.C. § 101(8) as "incurred by an	
	you have?		individual primarily for a personal,			,	
			□ No. Go to line 16b.				
		4.01	Yes. Go to line 17.	and delice O Decide	<i>d-64</i> d-64-46	at a construction of the above	
		16b.	Are your debts primarily busine money for a business or investme				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	nat are not consu	mer debts or business	debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.			
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be available			ty is excluded and administrative expenses	
	administrative expenses are paid that funds will		■ No				
	be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000	
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000 ☐ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000	
		□ 100-199 □ 200-999		10,001 25,000		□ More than 100,000	
19.	How much do you	\$ 0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million		☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$100,000,001 - \$500 million		☐ More than \$50 billion	
Part	t 7: Sign Below						
	you	I have ex	amined this petition, and I declare	under penalty of	periury that the informa	tion provided is true and correct.	
	,	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11,					
			tates Code. I understand the relief				
		If no attor	rney represents me and I did not pa nt, I have obtained and read the not	ay or agree to pay ice required by 1	y someone who is not a 1 U.S.C. § 342(b).	an attorney to help me fill out this	
		I request	relief in accordance with the chapter	er of title 11, Unit	ed States Code, specif	ied in this petition.	
I understand making a false statement, concealing property, or obtaining money or property by fraud in connect bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 1 and 3571.					property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Josh	nua Scott King		/s/ Allison Marie M		
			Scott King e of Debtor 1		Allison Marie King Signature of Debtor 2		
		Executed	October 10, 2019 MM / DD / YYYY		Executed on Octo	ber 10, 2019 DD / YYYY	

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Debtor 1 Joshua Scott King
Debtor 2 Allison Marie King Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	s L'Hommedieu, Esq. Attorney for Debtor	Date	October 10, 2019 MM / DD / YYYY
E. Chris L'	Hommedieu, Esq. 8299		
L'Hommed Firm name	dieu Law Office		
	Street ME 04240 City, State & ZIP Code		
Contact phone	(207) 786-5244	Email address	Lewistonlawbky@yahoo.com
8299 ME			

Case 19-20524 Doc 1 Filed 10/10/19 Entered 10/10/19 16:53:34 Desc Main

		Docume	ui Paue a ui os	
Fill in this infor	mation to identify your	case:		
Debtor 1	Joshua Scott Kin	g		
	First Name	Middle Name	Last Name	
Debtor 2	Allison Marie Kin	g		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MAINE		
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	
		value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,522.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,522.00
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	9,525.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,077.65
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	122,606.24
	Your total liabilities	\$	133,208.89
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,106.91
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,858.05
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
٠.	What kind of debt do you have:		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Joshua Scott King
Debtor 2 Allison Marie King

Debtor 3 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,839.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,077.65
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	49,276.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	50,353.65

	Case 19-20524 L	OC 1 Filed 10/10/19 Entered 10/10/	19 16:53:34 Des	sc Main
Fill in this	information to identify your	Document Page 10 of 65 case and this filing:		
Debtor 1	Joshua Saatt Kin	~		
Debior 1	Joshua Scott King First Name	Middle Name Last Name		
Debtor 2	Allison Marie King	g		
(Spouse, if fili	ng) First Name	Middle Name Last Name		
United Sta	ites Bankruptcy Court for the:	DISTRICT OF MAINE		
Cooo num	hor			—
Case num	Dei			☐ Check if this is an amended filing
Officia	I Form 106A/B			
	dule A/B: Prop	ortv		40/4E
		e items. List an asset only once. If an asset fits in more than o		12/15
No. Go Yes. V Part 2: De	wn or have any legal or equitable to to Part 2. Where is the property? escribe Your Vehicles on, lease, or have legal or equ	interest in any residence, building, land, or similar property? itable interest in any vehicles, whether they are registed, also report it on Schedule G: Executory Contracts and Utility vehicles, motorcycles		hicles you own that
■ Yes				
3.1 Mak	1	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Yea		☐ Debtor 2 only		, , ,
App	roximate mileage:	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	er information:	At least one of the debtors and another		,
ow	es \$9,525.00	2 7 th loads one of the desice and another		
		Check if this is community property (see instructions)	\$6,005.00	\$6,005.00
2.2 Mal	e Chevrolet	Who has an interest in the arrange of Co.	Do not deduct secured cla	aims or exemptions. Put
3.2 Mak	B4 111	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on <i>Schedule D:</i>
Mod Yea		Debtor 1 only	Greditors virio Have Clair	нь оеситей ву Ргорепу.
			Current value of the	Current value of the
	roximate mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	er information:	☐ At least one of the debtors and another		
OW	cs	Check if this is community property (see instructions)	\$1,972.00	\$1,972.00

Official Form 106A/B Schedule A/B: Property page 1

	Case 19-2	0524	Doc 1	Filed 10/10/19 Document	Entered 10/10/19 16:5 Page 11 of 65	3:34 Desc Ma	in
Debtor 1 Debtor 2	Joshua Scott Allison Marie			Document	Case number	(if known)	
					cles, other vehicles, and accessor owmobiles, motorcycle accessories	ies	
☐ Yes							
.pages y		d for Part	2. Write that	t number here	om Part 2, including any entries fo		\$7,977.00
Do you ow	n or have any le	gal or equ	uitable intere	est in any of the follow	ring items?	portion y Do not de	value of the rou own? educt secured exemptions.
<i>Example</i> ☐ No	old goods and fues: Major appliand			ina, kitchenware			
		general	household	l furnishings			\$1,000.00
□ No		ohones, ca	ameras, medi	stereo, and digital equip a players, games es, ipad, Xbox One	oment; computers, printers, scanners	; music collections; elect	tronic devices
		0 1 7 0, 2	. con phone	, ipuu, xbox 0110			
Example No	bles of value es: Antiques and to other collection				oks, pictures, or other art objects; sta	mp, coin, or baseball ca	d collections;
		yo-yos					\$150.00
Example No	ent for sports an es: Sports, photog musical instru Describe	graphic, ex		ther hobby equipment;	bicycles, pool tables, golf clubs, skis	; canoes and kayaks; cal	pentry tools;
□ No		, shotguns	, ammunition	, and related equipmen	t		
		H&K us	e .45 servic	ce pistol			\$700.00
□ No ´		thes, furs,	leather coats	s, designer wear, shoes	, accessories		

Official Form 106A/B

Schedule A/B: Property

\$200.00

clothing

Dahtand	Case 19-20524	Doc 1	Filed 10/10/19 Document	Entered Page 12	d 10/10/19 16:53:34 of 65	Desc Main
Debtor 1 Debtor 2	3				Case number (if known)	
	<i>mples:</i> Everyday jewelry, co	stume jewelry,	engagement rings, wed	ding rings, hei	rloom jewelry, watches, gems, ç	gold, silver
	misce	llaneous jev	velry			\$500.00
Exa ■ No □ Ye	es. Describe		u did not already list, i	ncluding any	health aids you did not list	
■ No					·	
	d the dollar value of all of y Part 3. Write that number			•		\$3,050.00
Part 4:	Describe Your Financial Asset	ts				
	own or have any legal or e		est in any of the follow	ving?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	mples: Money you have in y			osit box, and c	on hand when you file your petiti	on
					cash	\$55.00
	institutions. If you ha		al accounts; certificates occunts with the same ins		res in credit unions, brokerage l ch.	houses, and other similar
_	es		Institution r	name:		
	17.1.	checking &	& savings Central N	laine FCU		\$440.00
	ds, mutual funds, or public			ney market acc	counts	
	PS	Institution or i	ssuer name:			
	t venture	interests in ir	ncorporated and uninc	orporated bu	sinesses, including an interes	et in an LLC, partnership, and
	es. Give specific information	about them me of entity:			% of ownership:	
Neg Non ■ No		personal check those you can	s, cashiers' checks, pro	missory notes	, and money orders.	
1170	s Give specific information:	anout them				

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

Entered 10/10/19 16:53:34 Page 13 of 65 Document Debtor 1 Joshua Scott King Debtor 2 **Allison Marie King** Case number (if known) 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: pension Maine State Retirement - H \$0.00 Maine State Retirement - W pension \$0.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No

☐ Yes. Give specific information...

Case 19-20524

Doc 1

Filed 10/10/19

Desc Main

	Case 19-20524	Doc 1	Filed 10/10/19 Document	Entered 10/10/19 16:53:34 Page 14 of 65	Desc Main
Debto Debto				Case number (if known)	
<i>E</i>	No Yes. Name the insurance compa		,	HSA); credit, homeowner's, or renter's insurar Beneficiary:	nce Surrender or refund
					value:
		n life policy ne Municip	y through employer - oal	H wife	\$0.00
lf so ■	omeone has died.			ed surance policy, or are currently entitled to rec	eive property because
E ■	xamples: Accidents, employment	nt disputes, ir	you have filed a lawsui nsurance claims, or rights	it or made a demand for payment s to sue	
34. O t	her contingent and unliquidat	ed claims of	f every nature, including	g counterclaims of the debtor and rights to	set off claims
	ny financial assets you did no No Yes. Give specific information	t already list			
	Add the dollar value of all of your Part 4. Write that number h			ny entries for pages you have attached	\$495.00
Part 5:	Describe Any Business-Related	l Property You	u Own or Have an Interest I	n. List any real estate in Part 1.	
_	you own or have any legal or equ	itable interest	in any business-related p	roperty?	
_	lo. Go to Part 6. es. Go to line 38.				
Part 6:	Describe Any Farm- and Comm If you own or have an interest in fa			n or Have an Interest In.	
	you own or have any legal of No. Go to Part 7. Yes. Go to line 47.	r equitable ii	nterest in any farm- or o	commercial fishing-related property?	
Part 7:	Describe All Property You	Own or Have	an Interest in That You Did	l Not List Above	
Ε	you have other property of a xamples: Season tickets, countr				
	No Yes. Give specific information				

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Joshua Scott King Debtor 1 Debtor 2 **Allison Marie King** Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$7,977.00 Part 3: Total personal and household items, line 15 \$3,050.00 57. Part 4: Total financial assets, line 36 58. \$495.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$11,522.00 \$11,522.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$11,522.00

Official Form 106A/B Schedule A/B: Property page 6

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		17(7(4)))	1 71(1), 1(7) (7)	
Fill in this infor	mation to identify your	case:		
Debtor 1	Joshua Scott Kin	g		
	First Name	Middle Name	Last Name	
Debtor 2	Allison Marie Kin	g		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MAINE		
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Id	entify the	Property	/ You C	Claim as	Exemp	١t
------------	------------	----------	---------	----------	-------	----

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2013 Dodge Journey owes \$9,525.00	\$6,005.00		\$7,500.00	Me. Rev. Stat. Ann. tit. 14, § 4422(2)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	,
2006 Chevrolet Malibu owes \$0.00	\$1,972.00		\$7,500.00	Me. Rev. Stat. Ann. tit. 14, 9
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	,
general household furnishings Line from Schedule A/B: 6.1	\$1,000.00		\$1,000.00	Me. Rev. Stat. Ann. tit. 14, § 4422(3)
			100% of fair market value, up to any applicable statutory limit	
3 TVs, 2 cell phones, ipad, Xbox One Line from Schedule A/B: 7.1	\$500.00		\$500.00	Me. Rev. Stat. Ann. tit. 14, § 4422(3)
Zino nom concedency v Zi			100% of fair market value, up to any applicable statutory limit	(e)
yo-yos Line from Schedule A/B: 8.1	\$150.00		\$150.00	Me. Rev. Stat. Ann. tit. 14, § 4422(15)
Eine Hein Geriedale 7/D. Gil			100% of fair market value, up to any applicable statutory limit	(.0)

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Allison Marie King Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B H&K use .45 service pistol Me. Rev. Stat. Ann. tit. 14, § \$700.00 \$700.00 Line from Schedule A/B: 10.1 4422(5) 100% of fair market value, up to any applicable statutory limit Me. Rev. Stat. Ann. tit. 14, § clothing \$200.00 \$200.00 Line from Schedule A/B: 11.1 4422(3) П 100% of fair market value, up to any applicable statutory limit miscellaneous jewelry Me. Rev. Stat. Ann. tit. 14, § \$500.00 \$500.00 Line from Schedule A/B: 12.1 4422(4) 100% of fair market value, up to any applicable statutory limit Me. Rev. Stat. Ann. tit. 14, § checking & savings: Central Maine \$440.00 \$440.00 **FCU** 4422(15) Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit pension: Maine State Retirement - H Me. Rev. Stat. Ann. tit. 3, § \$0.00 \$0.00 Line from Schedule A/B: 21.1 703; Me. Rev. Stat. Ann. tit. 4, § 1203; Me. Rev. Stat. Ann. tit. 100% of fair market value, up to any applicable statutory limit 5, § 17054 pension: Maine State Retirement - W Me. Rev. Stat. Ann. tit. 3, § \$0.00 \$0.00 703; Me. Rev. Stat. Ann. tit. 4, Line from Schedule A/B: 21.2 § 1203; Me. Rev. Stat. Ann. tit. 100% of fair market value, up to any applicable statutory limit 5, § 17054 term life policy through employer - H Me. Rev. Stat. Ann. tit. 14, § \$0.00 \$0.00 Maine Municipal 4422(11) Beneficiary: wife 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Joshua Scott King

Debtor 1

Case :	19-20524	Doc 1 Filed 10/10/19 Document	Entere Page 18	ed 10/10/19 16:5	3:34 Desc N	iain
Fill in this information	n to identify you		Paue 10	5 01 03		
	oshua Scott K st Name	Middle Name	Last Name			
Debtor 2 A	Ilison Marie K	ina				
	st Name	Middle Name	Last Name			
United States Bankrup	tcy Court for the	: DISTRICT OF MAINE				
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Form 10	neD					
Official Form 10			_			
schedule D:	Creditors	Who Have Claims	Secure	d by Property	<u>/ </u>	12/15
		If two married people are filing togeth				
s needed, copy the Addi number (if known).	tional Page, fill it	out, number the entries, and attach it	to this form. O	on the top of any addition	al pages, write your na	me and case
. Do any creditors have	claims secured b	y your property?				
		his form to the court with your other	schedules. Y	ou have nothing else to	report on this form.	
Yes. Fill in all of		·		J	.,	
	ured Claims	below.				
			Pr	Column A	Column B	Column C
		more than one secured claim, list the cre s a particular claim, list the other creditors		/ Amount of claim	Value of collateral	Unsecured
much as possible, list the	claims in alphabeti	ical order according to the creditor's nam	e.	Do not deduct the value of collateral.	that supports this claim	portion If any
Gateway One	Lending &					
Finance		Describe the property that secures	the claim:	\$9,525.00	\$6,005.00	\$0.00
Creditor's Name		2013 Dodge Journey				
175 North Rive	erview	owes \$9,525.00				
Suite 100		As of the date you file, the claim is:	Check all that			
Anaheim, CA	92808	apply. Contingent				
Number, Street, City, S	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2		Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the deb		Judgment lien from a lawsuit	Vahiala I a			
☐ Check if this claim re community debt	elates to a	Other (including a right to offset)	Vehicle Lo	oan		
	Opened					
	07/15 Last					
	Active					
Date debt was incurred	7/19/19	Last 4 digits of account num	ber 0915			
Add the dollar value of	f your entries in C	column A on this page. Write that num	ber here:	\$9,52	5.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

If this is the last page of your form, add the dollar value totals from all pages.

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

\$9,525.00

Write that number here:

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		Document	Page 19 of	f 65		
Fill in this	information to identify your cas	se:				
Debtor 1	Joshua Scott King				1	
	First Name	Middle Name	Last Name			
Debtor 2	Allison Marie King	A4111 A1				
(Spouse if, fili	ing) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	DISTRICT OF MAINE				
Case num	ber					
(if known)					☐ Check	if this is an
					amend	led filing
Official	Form 106E/F					
	ule E/F: Creditors Wh	o Have Unsecured	d Claims			12/15
any executo Schedule G Schedule D eft. Attach to name and c	elete and accurate as possible. Use Fory contracts or unexpired leases the Executory Contracts and Unexpire Creditors Who Have Claims Secure the Continuation Page to this page. ase number (if known). List All of Your PRIORITY Unse	at could result in a claim. Also d Leases (Official Form 106G). d by Property. If more space is If you have no information to re	list executory contra Do not include any o needed, copy the Pa	acts on Schedule A/B: I creditors with partially s art you need, fill it out,	Property (Official For secured claims that a number the entries in	m 106A/B) and on tre listed in the boxes on the
	creditors have priority unsecured c					
_ `	Go to Part 2.	iainis against you .				
■ Yes						
identify possible Part 1.	of your priority unsecured claims. It what type of claim it is. If a claim has be e, list the claims in alphabetical order a If more than one creditor holds a particle explanation of each type of claim, see	ooth priority and nonpriority amou according to the creditor's name. I sular claim, list the other creditors	ints, list that claim here If you have more than s in Part 3.	e and show both priority a two priority unsecured cl	and nonpriority amount aims, fill out the Contir Priority	ts. As much as nuation Page of Nonpriority
2.1 In	ternal Revenue Service	Last 4 digits of acco	unt number	\$1,077.65	amount \$1,077.65	amount \$0.00
Pr	iority Creditor's Name			Ψ1,077.00		Ψ0.00
	O Box 7346 hiladelphia, PA 19101-7346	When was the debt i	ncurred?		-	
	umber Street City State Zip Code	As of the date you fil	le, the claim is: Chec	k all that apply		
Who i	incurred the debt? Check one.	☐ Contingent				
☐ De	ebtor 1 only	☐ Unliquidated				
□ De	ebtor 2 only	☐ Disputed				
■ De	ebtor 1 and Debtor 2 only	Type of PRIORITY ur	nsecured claim:			
☐ At	least one of the debtors and another	☐ Domestic support	obligations			
□c⊦	neck if this claim is for a community	debt Taxes and certain	other debts you owe t	he government		
Is the	claim subject to offset?	☐ Claims for death o	-	-		
■ No	5	Other. Specify				
☐ Ye	es		018 income taxe	es		
Part 2:	List All of Your NONPRIORITY	Unsecured Claims				
3. Do any	r creditors have nonpriority unsecur	ed claims against you?				
	You have nothing to report in this part.	- ,	h your other schedule:	S.		
■ Yes	· i.					
	of your nonpriority unsecured clain	es in the alphabetical order of t	the creditor who hale	ts each claim. If a cradit	or has more than one	nonpriority
unsecu	red claim, list the creditor separately for ne creditor holds a particular claim, list t	r each claim. For each claim liste	ed, identify what type o	of claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

Part 2.

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Case number (if known) Debtor 2 Allison Marie King 4.1 Androscoggin Savings Bank Last 4 digits of account number 6194 Unknown Nonpriority Creditor's Name Opened 09/08 Last Active 30 Lisbon St When was the debt incurred? 08/09 Lewiston, ME 04240 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify student loan 4.2 **Beeline Cable TV Inc** Last 4 digits of account number \$234.00 Nonpriority Creditor's Name 131 Lakewood Road When was the debt incurred? Madison, ME 04950 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify television services 4.3 **CENCAP FCU** Last 4 digits of account number \$9,000.00 Nonpriority Creditor's Name 443 Franklin Ave When was the debt incurred? Hartford, CT 06114 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify persoanl loan

Debtor 1 Joshua Scott King

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	1 Joshua Scott King 2 Allison Marie King		Case number (if known)			
4.4	Central Maine FCU	Last 4 digits of account number	4114	\$75.00		
	Nonpriority Creditor's Name	_	0			
	1000 Lisbon St Lewiston, ME 04240	When was the debt incurred?	Opened 07/12 Last Active 8/01/19			
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts			
	□Yes	Other. Specify various cre				
4.5	Central Maine Power Company	Last 4 digits of account number		\$80.27		
	Nonpriority Creditor's Name 83 Edison Drive Augusta, ME 04336-0001	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing				
	□Yes	Other. Specify utility				
4.6	Centrl Maine FCU	Last 4 digits of account number	9184	Unknown		
	Nonpriority Creditor's Name 1000 Lisbon St Lewiston, ME 04240	When was the debt incurred?	Opened 7/30/12 Last Active 2/17/16			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing				
	Yes	Other. Specify various cre	edit card debt			

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Debt	or 2 Allison Marie King	Case number (if known)				
4.7	Charter Communications	Last 4 digits of account number	\$181.00			
	Nonpriority Creditor's Name 400 Atlantic St, 10th FI	When was the debt incurred?				
	Stamford, CT 06901 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	The of the state year ine, and claim to chook an area apply				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	\square Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify telephone services				
4.8	Community Clinical Services	Last 4 digits of account number	\$1,649.00			
	Nonpriority Creditor's Name 60 Second Street, Suite 2	When was the debt incurred?				
	Auburn, ME 04210 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	\square Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify medical services				
	Family Eye Health & Contact Lens		407.00			
4.9	Center Nonpriority Creditor's Name	Last 4 digits of account number	\$35.00			
	220 Sabattus Street Lewiston, ME 04240	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	□ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes	Other. Specify optometry services				
	□ res	Other. Specify Optometry Services				

Debtor 1 Joshua Scott King

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Debtor Debtor	1 Joshua Scott King 2 Allison Marie King	Case number (if known)	
4.1 0	Inland Family Care	Last 4 digits of account number	\$70.70
	Nonpriority Creditor's Name 16 Concourse West Waterville, ME 04901	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify medical services	
4.1	Kennebec Behavioral Health	Last 4 digits of account number	\$307.00
	Nonpriority Creditor's Name 67 Eustis Parkway Waterville, ME 04901	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify counseling services	
4.1	Keystone Management	Last 4 digits of account number	\$1,402.00
	Nonpriority Creditor's Name 99 Fisherville Road Concord, NH 03303	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify overdue rent	

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Debtor 1 Joshua Scott King

Debtor 2 Allison Marie King		Case number (if known)				
4.1			4			
3	Kristine Gould	Last 4 digits of account number	\$1,000.00			
	Nonpriority Creditor's Name 13 Maple Street	When was the debt incurred?				
	Fryeburg, ME 04037	Then was the dest mounted?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify personal loan				
4.1	Maina Haalth		¢E 000 26			
4	Maine Health Nonpriority Creditor's Name	Last 4 digits of account number	\$5,808.26			
	Patient Financial Services	When was the debt incurred?				
	PO Box 16021					
	Lewiston, ME 04243-9501	_				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify medical services				
4.1	MaineGeneral Medical Center	Last 4 digits of account number	\$10,055.11			
5	Nonpriority Creditor's Name	Last 4 digits of account number	410,000111			
	10 Caldwell Road	When was the debt incurred?				
	Augusta, ME 04330					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	_				
	☐ Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	Other. Specify medical services				

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Debtor 1 Joshua Scott King Debtor 2 Allison Marie King Case number (if known) 4.1 Meredith Villiage \$24.100.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 24 State Route 25 When was the debt incurred? Meredith, NH 03253 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify deficiency on mobile home Navient 0912 \$5,380.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 09/05 Last Active Attn: Bankruptcy PO Box 9640 When was the debt incurred? 7/25/19 Wilkes-Barre, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify student loan 4.1 \$4,462.00 Navient 0829 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 08/06 Last Active PO Box 9640 When was the debt incurred? 7/25/19 Wilkes-Barre, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify student loan

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Debt	or 2 Allison Marie King		Case number (if known)	
4.1 9	Navient	Last 4 digits of account number	0829	\$3,460.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 9640 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 08/06 Last Active 7/25/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	■ Student loans □ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa		
4.2 0	Navient	Last 4 digits of account number	1020	\$2,944.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 9640 Willow Boxes BA 48773	When was the debt incurred?	Opened 10/04 Last Active 7/25/19	
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	g plans, and other similar debts	
	□ Yes	Other. Specify		
		student loa	ın	
4.2 1	Navient	Last 4 digits of account number	0929	\$1,939.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 9640 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 09/03 Last Active 7/25/19	
Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community debt	■ Student loans □ Obligations arising out of a sepa		
	Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharir	g plans, and other similar debts	
	□Yes	Other. Specify		
		student loa	ın	

Debtor 1 Joshua Scott King

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Debto Debto	r 1 Joshua Scott King r 2 Allison Marie King		Case number (if known)	
4.2	Navient	Last 4 digits of account number	1020	\$514.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 9640 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 10/04 Last Active 7/25/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	At least one of the debtors and another	Student loans	a Claiiii.	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes			
		student loa		
4.2				
3	Northern Radiology Associates	Last 4 digits of account number		\$298.00
	Nonpriority Creditor's Name 489 State Street Bangor, ME 04401	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify medical se	rvices	
4.2	Portfolio Recovery	Last 4 digits of account number	3748	\$428.00
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd	When was the debt incurred?	Opened 06/16	
	Norfold, VA 23502 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	76 or the date you me, the claim	e. Chook an that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	a plans, and other similar debts	
	■ NO			
	□Yes	Other. Specify Capital Bar	unt; orginal creditor: Comenity nk	

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Debtor 1 Joshua Scott King

Debt	or 2 Allison Marie King	Case number (if known)	
4.2 5	Redington-Fairview General Hospital	Last 4 digits of account number	\$638.00
	Nonpriority Creditor's Name 46 Fariview Avenue PO Box 468	When was the debt incurred?	
	Skowhegan, ME 04976 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify medical services	
4.2 6	Sandcastle Clinical & LA Hearing Center	Last 4 digits of account number	\$25.36
	Nonpriority Creditor's Name 72 Strawberry Avenue Lewiston, ME 04240	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify medical services	
4.2 7	Spurwink Services Nonpriority Creditor's Name	Last 4 digits of account number	\$900.00
	901A Washington Ave Portland, ME 04103	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify counseling services	
		· · · · · · · · · · · · · · · · · · ·	

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Debtor 1 Joshua Scott King Debtor 2 Allison Marie King Case number (if known) 4.2 \$2.649.00 St. Mary's Health System Last 4 digits of account number 8 Nonpriority Creditor's Name PO Box 291 When was the debt incurred? Lewiston, ME 04243-0291 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify medical services 4.2 St. Mary's Regional Medical Center \$13,282.79 Last 4 digits of account number 9 Nonpriority Creditor's Name PO Box 291 When was the debt incurred? Lewiston, ME 04243-0291 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify medical services ☐ Yes 4.3 U.S. Department of Education 8210 \$6,323.00 0 Last 4 digits of account number Nonpriority Creditor's Name Ecmc/Bankruptcy Opened 04/14 Last Active PO Box 16408 When was the debt incurred? 6/27/19 Saint Paul, MN 55116 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated ■ Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other, Specify student loan

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Debtor Debtor	1 Joshua Scott King 2 Allison Marie King		Case number (if known)		
4.3 1	U.S. Department of Education	Last 4 digits of account number	8329	\$4,620.00	
	Nonpriority Creditor's Name Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 12/14 Last Active 6/27/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify			
		student loa	n		
4.3 2	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	1216	\$3,537.00	
	Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 04/14 Last Active 6/27/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	I claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify			
		student loa	n		
4.3 3	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	1218	\$3,302.00	
	Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 12/14 Last Active 6/27/19		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify			
		student loa	n		

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Debtor Debtor	1 Joshua Scott King 2 Allison Marie King		Case number (if known)	
4.3 4	U.S. Department of Education	Last 4 digits of account number	3325	\$3,145.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 07/08 Last Active 6/27/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		student loa	n	
4.3 5	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	8225	\$2,458.00
	Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 05/15 Last Active 6/27/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify		
		student loa	n	
4.3 6	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	1208	\$1,863.00
	Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 05/15 Last Active 6/27/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	■ Student loans		
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	n	

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Debte	or 2 Allison Marie King		Case number (if known)	
4.3 7	U.S. Department of Education	Last 4 digits of account number	8220	\$1,698.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/12 Last Active 6/27/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	n	
4.3 8	U.S. Department of Education Nonpriority Creditor's Name	Last 4 digits of account number	8214	\$1,332.00
	Ecmc/Bankruptcy PO Box 16408	When was the debt incurred?	Opened 03/13 Last Active 6/27/19	
	Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		student loa	ın .	
4.3 9	U.S. Department of Education	Last 4 digits of account number	1224	\$1,159.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 03/13 Last Active 6/27/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	<u>_</u>		
	Debtor 1 only	Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans		
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	ın .	

Debtor 1 Joshua Scott King

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Debt	or 2 Allison Marie King		Case number (if known)	
4.4 0	U.S. Department of Education	Last 4 digits of account number	1330	\$1,140.00
	Nonpriority Creditor's Name Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 06/12 Last Active 6/27/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
		student loa	n	
4.4 1	US Cellular Corp.	Last 4 digits of account number		\$723.63
	Nonpriority Creditor's Name Attn: Write Off Department PO Box 7835	When was the debt incurred?		
	Madison, WI 53707-7835 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	<u> </u>			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alabar	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans	and a second and the	
	Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify telephone s	services	
4.4 2	Waterville Pediatrics	Last 4 digits of account number		\$326.12
	Nonpriority Creditor's Name 295 C Kennedy Memorial Dr Waterville, ME 04901	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	o plans, and other similar debts	
		·		
	☐ Yes	Other. Specify medical se	rvices	

Debtor 1 Joshua Scott King

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Debtor 1 Joshua Scott King Debtor 2 Allison Marie King Case number (if known) 4.4 **YMCA** \$62.00 Last 4 digits of account number 3 Nonpriority Creditor's Name **62 Turner Street** When was the debt incurred? Auburn, ME 04210 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify membership dues Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Advanced Collection Services** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 7103 ■ Part 2: Creditors with Nonpriority Unsecured Claims Lewiston, ME 04243-7103 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Advanced Collection Services** $\hfill \square$ Part 1: Creditors with Priority Unsecured Claims Line 4.42 of (Check one): PO Box 7103 ■ Part 2: Creditors with Nonpriority Unsecured Claims Lewiston, ME 04243-7103 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Balanced Healthcare Receivables** Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 164 Burke Street, Suite 201 Part 2: Creditors with Nonpriority Unsecured Claims Nashua, NH 03060 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Covenant Health** Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 85 Prescott St, Ste 402 Part 2: Creditors with Nonpriority Unsecured Claims Worcester, MA 01605 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Credit Protection** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 802068 Part 2: Creditors with Nonpriority Unsecured Claims Dallas, TX 75380-2068 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Enhanced Recovery Corporation** Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy Part 2: Creditors with Nonpriority Unsecured Claims 8014 Bayberry Road Jacksonville, FL 32256-7412 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Law Offices of Carl R. Trynor, PA Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4290 Part 2: Creditors with Nonpriority Unsecured Claims Portland, ME 04101

Last 4 digits of account number

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Debtor 1 Joshua Scott King Case number (if known) Debtor 2 Allison Marie King Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? National Credit Systems, Inc. Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attn: Bankruptcy ■ Part 2: Creditors with Nonpriority Unsecured Claims PO Box 312125 Atlanta, GA 31131 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? NH Northeast Credit Services. Inc. Line 4.28 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Attention: Bankruptcy ■ Part 2: Creditors with Nonpriority Unsecured Claims 41 Simon Street, Suite 2a Nashua, NH 03063 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? NH Northeast Credit Services, Inc. Line 4.29 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **Attention: Bankruptcy** ■ Part 2: Creditors with Nonpriority Unsecured Claims 41 Simon Street, Suite 2a Nashua, NH 03063 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Office of the US Attorney Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 100 Middle Street Part 2: Creditors with Nonpriority Unsecured Claims E Tower, 6th Fl. Portland, ME 04101 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Office of the US Attorney Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 100 Middle Street ■ Part 2: Creditors with Nonpriority Unsecured Claims E Tower, 6th Fl. Portland, ME 04101 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Receivables Performance** Line 4.41 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Management Part 2: Creditors with Nonpriority Unsecured Claims 20818 44th Avenue West, Suite 140 Lynnwood, WA 98036 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Solomon and Solomon PC Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 5 Columbia Circle Part 2: Creditors with Nonpriority Unsecured Claims Albany, NY 12203 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? The Thomas Agency Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6759 Part 2: Creditors with Nonpriority Unsecured Claims Portland, ME 04103 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address The Thomas Agency Line 4.25 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6759 Part 2: Creditors with Nonpriority Unsecured Claims Portland, ME 04103 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? The Thomas Agency Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6759 Part 2: Creditors with Nonpriority Unsecured Claims Portland, ME 04103 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.23 of (Check one): The Thomas Agency ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 6759

Official Form 106 E/F

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Debtor 1 Joshua Scott King Debtor 2 Allison Marie King	Case number (if known)
Portland, ME 04103	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?
The Thomas Agency	Line 4.14 of (Check one):
PO Box 6759 Portland, ME 04103	■ Part 2: Creditors with Nonpriority Unsecured Claims
Fortialia, WE 04103	Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 1,077.65
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 1,077.65
				Total Claim
	6f.	Student loans	6f.	\$ 49,276.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 73,330.24
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 122,606.24

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		Document	Page 37 01 05	
Fill in this infor	mation to identify your	case:		
Debtor 1	Joshua Scott Kin	ng		
	First Name	Middle Name	Last Name	_
Debtor 2	Allison Marie Kin	ıg		
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	DISTRICT OF MAINE		_
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Ony		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	- City		<u> </u>	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Documei	nt Page 38 of	65
Fill in this	information to identify your	case:		
Debtor 1	Joshua Scott Kin	a		
	First Name	Middle Name	Last Name	
Debtor 2	Allison Marie Kin	g		
(Spouse if, filing	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	DISTRICT OF MAINE		
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
		1 4		
Sched	lule H: Your Cod	ebtors		12/15
your name	and number the entries in the and case number (if known) you have any codebtors? (If	. Answer every question.	•	this page. On the top of any Additional Pages, write s a codebtor.
_	,		·	
■ No				
☐ Yes	3			
	hin the last 8 years, have you na, California, Idaho, Louisiana,			? (Community property states and territories include gton, and Wisconsin.)
■ N.	On to Page 0			
	. Go to line 3. s. Did your spouse, former spor	use or logal equivalent live	with you at the time?	
□ 163	s. Dia your spouse, former spor	use, or legal equivalent live	with you at the time:	
in line Form	e 2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make su	your spouse is filing with you. List the person shown are you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor	ID O- d-		Column 2: The creditor to whom you owe the debt
	Name, Number, Street, City, State and Z	r Code		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
=	Number Street			
	City	State	ZIP Code	
3.2				☐ Schedule D, line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			
	City	State	ZIP Code	

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Fill	in this information to identify your	case:								
Del	btor 1 Joshua Sco	ott King								
	btor 2 Allison Mai	rie King								
Uni	ited States Bankruptcy Court for th	e: DISTRICT OF MAINE	<u> </u>							
	se number 		-			□ Ar		nt show	ing postpetition following date:	chapter
0	fficial Form 106I					MI	M / DD/ Y	YYY		
S	chedule I: Your Ind	ome								12/15
spo atta	plying correct information. If you use. If you are separated and yo ch a separate sheet to this form t1: Describe Employment Fill in your employment	ur spouse is not filing w . On the top of any additi	ith you, do not inclu ional pages, write yo	ıde infor	mati	on about d case nu	your spo mber (if k	use. If r	nore space is Answer every	needed,
	information.		Debtor 1				_		filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				■ Emplo	,		
	employers.	Occupation	police officer				secreta	ry & su	mmer progra	ams
	Include part-time, seasonal, or self-employed work.	Employer's name	Citry of Auburn	<u> </u>			Lewisto	n Scho	ool Dept	
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed t	here? <u>3 years</u>	3			2	years		
Esti spou	imate monthly income as of the use unless you are separated.	date you file this form. If	,	·		·			·	J
more	e space, attach a separate sheet t	o triis iorni.				For Deb	tor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	4,	861.00	\$	2,174.00	
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add	ine 2 + line 3.		4.	\$	4,86	1.00	\$	2,174.00	

Official Form 106I Schedule I: Your Income page 1

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Joshua Scott King Debtor 1 **Allison Marie King** Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 4.861.00 2,174.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 536.92 274.88 5b. Mandatory contributions for retirement plans 5b. \$ 471.97 \$ 190.52 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5d. Required repayments of retirement fund loans 5d. \$ 0.00 0.00 5e. Insurance 5e. \$ 427.80 0.00 5f. Domestic support obligations 5f. 0.00 0.00 5q. **Union dues** 5q. 0.00 0.00 5h. Other deductions. Specify: flex savings account 5h.+ 26.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 1,462.69 465.40 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 3,398.31 1,708.60 List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 0.00 8a 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ \$ 8h. 0.00 \$ 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 3,398.31 \$ 1,708.60 \$ 5,106.91 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 0.00 Specify: 11. +\$ 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 5,106.91 12. \$ applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.

Yes. Explain:

Joshua is anticipating a raise in November, however he has been working overtime to make ends meet. Given the raise will enable him to make ends meet, he is ending the overtime.

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Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	Joshua Scot	t Kina			Ch	neck if this	is:		
					-		An ame	ended filing		
	otor 2	Allison Marie	e King						wing postpetition chapter	
(Spo	ouse, if filing)						13 exp	enses as of	the following date:	
Unit	ted States Bankr	ruptcy Court for the:	: DISTRI	CT OF MAINE			MM / D	D / YYYY		
l	se number nown)									
Of	fficial Fo	rm 106J								
S	chedule	J: Your I	Exper	nses					12/1	5
Be info	as complete a	and accurate as	possible eded, atta	. If two married peopl ich another sheet to t	e are filing together, b his form. On the top of					
		ibe Your House	hold							_
1.	Is this a joir									
	□ No. Go to									
			ın a separ	ate household?						
	■ N □ Y	_	st file Offic	ial Form 106J-2, <i>Exper</i>	nses for Separate House	ehold of De	ebtor 2.			
2.	Do you have	e dependents?	□ No							
	Do not list Debtor 2.		Yes.	Fill out this information for each dependent	•		Dep age	endent's	Does dependent live with you?	
	Do not state	4h a							□ No	
	dependents				Daughter		3		Yes	
	·								□ No	
					Son		9		■ Yes	
									□ No	
									☐ Yes	
									□ No	
_	_								☐ Yes	
3.		enses include f people other tl	han	No						
	•	d your depende		Yes						
				_						
Est exp	imate your ex		our bankr	uptcy filing date unle					apter 13 case to report f the form and fill in the	_
the		n assistance and		government assistan cluded it on <i>Schedul</i> e				Your exp	enses	
4.		or home owners			ce. Include first mortgag	e 4.	\$		900.00	
		led in line 4:	o ground (·			
							Ф		0.00	
		estate taxes rty, homeowner's	or rente	'e ingurance		4a. 4b.	· : ——		0.00	
		•		upkeep expenses		40. 4c.	· · · · · · · · · · · · · · · · · · ·		9.00 0.00	
		owner's associat				4d.	· : —		0.00	
5.				our residence, such as	s home equity loans		\$		0.00	

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	ua Scott King on Marie King	Case num	ber (if known)	
- Amo			(
Utilities:	oity, heat matural rea	0 -	¢.	•
	city, heat, natural gas	6a.	·	0.00
	, sewer, garbage collection	6b.		0.00
•	none, cell phone, Internet, satellite, and cable services	6c.	· -	215.00
	Specify:	6d.		0.00
	ousekeeping supplies	7.	· -	1,359.00
	nd children's education costs	8.	· -	606.20
•	undry, and dry cleaning	9.	· · · · · · · · · · · · · · · · · · ·	80.00
	re products and services	10.		0.00
	l dental expenses ion. Include gas, maintenance, bus or train fare.	11.	\$	320.00
	de car payments.	12.	\$	241.55
	ent, clubs, recreation, newspapers, magazines, and books	13.	· ·	100.00
	contributions and religious donations	14.		0.00
Insurance.				0.00
	de insurance deducted from your pay or included in lines 4 or 20.			
15a. Life in	surance	15a.	\$	0.00
15b. Health	insurance	15b.	\$	0.00
15c. Vehicl	e insurance	15c.	\$	150.00
15d. Other	insurance. Specify: flex health	15d.	\$	43.30
Taxes. Do n	ot include taxes deducted from your pay or included in lines 4 or 20.			
Specify:		16.	\$	0.00
	or lease payments:		•	
	ayments for Vehicle 1	17a.	·	350.00
•	ayments for Vehicle 2	17b.		0.00
17c. Other.		17c.	·	0.00
17d. Other.		17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	om your pay on line 5, Schedule I, Your Income (Official Form 106I). ents you make to support others who do not live with you.	10.	\$	0.00
Specify:	ents you make to support others who do not live with you.	19.	Ψ	0.00
	roperty expenses not included in lines 4 or 5 of this form or on Sche		our Income	
	ages on other property	20a.		0.00
20b. Real e		20b.	· ·	0.00
	rty, homeowner's, or renter's insurance	20c.	· -	0.00
•	enance, repair, and upkeep expenses	20d.		0.00
	owner's association or condominium dues	20e.	· -	0.00
. Other: Spec			+\$	433.00
union	student loans		+\$	51.00
			Γ	31.00
Calculate yo	our monthly expenses			
	es 4 through 21.		\$	4,858.05
22b. Copy lir	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line	22a and 22b. The result is your monthly expenses.		\$	4,858.05
Calavilata v	mandali mad income			
-	our monthly net income.	23a.	¢	E 400 04
	ine 12 (your combined monthly income) from Schedule I.		•	5,106.91
23b. Copy	your monthly expenses from line 22c above.	23b.	-\$	4,858.05
23c Subtro	act your monthly expenses from your monthly income.			
	isult is your <i>monthly net income</i> .	23c.	\$	248.86
1110 10	saic to your monthly not moome.			
	ect an increase or decrease in your expenses within the year after you lo you expect to finish paying for your car loan within the year or do you expect your			ase or decrease because o
	the terms of your mortgage?	ortgage	J. 110111 10 111010	and of doorouse bookings (
■ No.				
— 140. П Уев	Explain here:			

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Fill in this infor	mation to identify your	case:		
Debtor 1	Joshua Scott Kin	a		
	First Name	Middle Name	Last Name	—
Debtor 2	Allison Marie Kin			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF MAINE		
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 106Dec			
Declarat	tion About a	n Individual	Debtor's Schedul	es 12/15
obtaining mone		n connection with a bankr		alse statement, concealing property, or o \$250,000, or imprisonment for up to 20
Sig	n Below			
Did you pa	ay or agree to pay some	one who is NOT an attorn	ey to help you fill out bankruptcy f	forms?
■ No				
☐ Yes.	Name of person			ttach Bankruptcy Petition Preparer's Notice,
			D	eclaration, and Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the summ	nary and schedules filed with this o	declaration and
			V /a/ Alliano Mania Idio	_
	shua Scott King a Scott King		X /s/ Allison Marie King Allison Marie King	<u>}</u>
	ire of Debtor 1		Signature of Debtor 2	
g			- 3	
Date	October 10, 2019		Date October 10, 20	19

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Fil	in this inforr	nation to identify your	case:			
De	btor 1	Joshua Scott Kir	na			
		First Name	Middle Name	Last Name		
	btor 2 buse if, filing)	Allison Marie Kir	Middle Name	Last Name		
` '	, 0,	nlementary Court for the	DISTRICT OF MAINE			
Un	ited States Ba	nkruptcy Court for the:	DISTRICT OF MAINE			
	se number _				_	Check if this is an mended filing
	ficial Fo atement		Affairs for Individ	duals Filing for B	ankruptcy	4/19
info nun	rmation. If m	ore space is needed, n). Answer every ques	attach a separate sheet to tion.	this form. On the top of any	equally responsible for sup	
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	■ Married □ Not man					
2.	During the la	ast 3 years, have you	ived anywhere other than	where you live now?		
	■ No □ Yes. Lis	it all of the places you li	ved in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out Sch	edule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	Income			
. ~						
4.	Fill in the tota	al amount of income you	received from all jobs and a	g a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$45,305.00	■ Wages, commissions, bonuses, tips	\$21,511.00
			borracco, apo		bondood, lipo	

Official Form 107

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Joshua Scott King Debtor 1 Debtor 2 **Allison Marie King** Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$58,797.00 \$26,996.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$57,090.00 \$17,077.00 For the calendar year before that: Wages, commissions. Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment Amount you **Total amount** Was this payment for ... still owe paid Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. **Insider's Name and Address** Amount you **Dates of payment Total amount** Reason for this payment paid still owe

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Debtor 1 Joshua Scott King Debtor 2 **Allison Marie King** Case number (if known) **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment paid still owe **Kristine Gould** \$1,000.00 \$300.00 various personal loans Fryberg, ME Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Reason for this payment Insider's Name and Address Dates of payment Total amount Amount you paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No п Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. П Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes Fill in the details **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts

Address:

Person to Whom You Gave the Gift and

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	otor 1 Joshua Scott King otor 2 Allison Marie King	•		Case number (if known)	
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or or			ns with a tota	l value of more than	n \$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or	since you filed for bankruptcy, did	you lose anyt	hing because of the	eft, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the I the amount that insurance has paid. I ce claims on line 33 of Schedule A/B:	List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No Yes. Fill in the details.	preparir	ng a bankruptcy petition?			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	L'Hommedieu Law Office 190 Bates Street Lewiston, ME 04240 Lewistonlawbky@yahoo.com		\$1,365.00 for attorney fees and for filing fees	d \$335.00	9/19	\$1,700.00
17.	Within 1 year before you filed for bankru promised to help you deal with your cree Do not include any payment or transfer that No	ditors o	to make payments to your creditor		r transfer any prop	erty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for banks transferred in the ordinary course of you Include both outright transfers and transfer include gifts and transfers that you have also	u r busin s made a	ess or financial affairs? as security (such as the granting of a s			
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

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Debtor 1 **Joshua Scott King** Debtor 2 **Allison Marie King**

Case number (if known)

19.	beneficiary? (These are often called asset-prote		o a sen-settled trust or similar devic	e of which you are a					
	☐ Yes. Fill in the details.								
	Name of trust	Description and value of the	property transferred	Date Transfer was made					
Pai	rt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit Boxes, and	l Storage Units						
. Ci	List of Octum I manoral Accounts, moti	unionio, ouro poposit poxes, uno	otorage omes						
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa	other financial accounts; certifica	ites of deposit; shares in banks, cred						
	No Yes. Fill in the details.								
	Name of Financial Institution and L	ast 4 digits of Type of account number instrumen	t closed, sold, moved, or	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for bankruptcy	transferred r, any safe deposit box or other depo	ository for securities,					
	No								
	Yes. Fill in the details.	Who also had access to 20	Describe the contents	D					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
Pai	rt 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Include any pro	perty you borrowed from, are storing	ງ for, or hold in trust					
	■ No								
	Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value					
Pai	rt 10: Give Details About Environmental Inform	mation							
	the purpose of Part 10, the following definition								
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water, gro	- ·						
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	as defined under any environment	al law, whether you now own, opera	ate, or utilize it or used					
	Hazardous material means anything an environment of the hazardous material, pollutant, contaminant, o	onmental law defines as a hazardo	ous waste, hazardous substance, to	xic substance,					

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Joshua Scott King Debtor 2 Allison Marie King

Case number (if known)

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No						ntal law?				
	_	_								
	Name of Address	of site S (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Have yo	u notified any governmental unit of	any release of hazardous material?							
	■ No □ Yes	s. Fill in the details.	n the details.							
	Name of Address	of site S (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
26.	Have yo	u been a party in any judicial or adm	ninistrative proceeding under any envi	ron	mental law? Include settlements a	nd orders.				
	■ No □ Yes	s. Fill in the details.								
	Case T Case N		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Par	t 11: G	ive Details About Your Business or 0	Connections to Any Business							
27.	Within 4	years before you filed for bankrupt	cy, did you own a business or have an	y of	f the following connections to any	business?				
		A sole proprietor or self-employed in	n a trade, profession, or other activity,	eith	ner full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
		☐ An officer, director, or managing executive of a corporation								
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
	■ No	None of the above applies. Go to P	Part 12.							
	☐ Yes	s. Check all that apply above and fill	in the details below for each business	S .						
	Busine Addres	ss Name	Describe the nature of the business		Employer Identification number Do not include Social Security r	umber er ITIN				
		Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idilibei oi iiin.				
28.		lyears before you filed for bankruptons, creditors, or other parties.	cy, did you give a financial statement t	to ai	nyone about your business? Inclu	de all financial				
	■ No □ Yes	s. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)									

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Debtor 1 Joshua Scott King

Debtor 2 Allison Marie King	Case nur	mber (if known)
Part 12: Sign Below		
are true and correct. I understand that making	Financial Affairs and any attachments, and I declar g a false statement, concealing property, or obtaining to \$250,000, or imprisonment for up to 20 years, or	ng money or property by fraud in connection
/s/ Joshua Scott King	/s/ Allison Marie King	
Joshua Scott King	Allison Marie King	<u></u>
Signature of Debtor 1	Signature of Debtor 2	
Date October 10, 2019	Date October 10, 2019	
Did you attach additional pages to Your State	ment of Financial Affairs for Individuals Filing for L	Bankruptcy (Official Form 107)?
■ No		
□Yes		
Did you pay or agree to pay someone who is	not an attorney to help you fill out bankruptcy form	ns?
No		
☐ Yes. Name of Person Attach the Bank	kruptcy Petition Preparer's Notice, Declaration, and Sig	gnature (Official Form 119).

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Joshua Scott King			
	First Name	Middle Name	Last Name	
Debtor 2	Allison Marie King	Middle Name	Last Name	
(Spouse if, filing)	riist Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF M.	AINE	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	orm 108			
		n for Indiv	viduals Filing Under Chapt	er 7 12/15
If you are an ind	lividual filing under chap	ter 7, you must fi	ill out this form if:	
creditors hav	e claims secured by you	r property, or		
You must file thi	ever is earlier, unless the	thin 30 days after	not expired. r you file your bankruptcy petition or by the date s ne time for cause. You must also send copies to tl	
	eople are filing together nd date the form.	in a joint case, b	oth are equally responsible for supplying correct i	information. Both debtors must
	and accurate as possible our name and case num		s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	Socured Claims		
				. (24) 1.1 - (22) 401 1
information be		rt 1 of Schedule I	D: Creditors Who Have Claims Secured by Propert	ty (Official Form 106D), fill in the
Identify the cr	reditor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	at Did you claim the property as exempt on Schedule C?
			secures a dept :	as exempt on schedule C?
			_	_
Creditor's on the contract of	Sateway One Lending	& Finance	☐ Surrender the property.	□ No
name.			Retain the property and redeem it.Retain the property and enter into a	■ Yes
Description of	2013 Dodge Journe	y	Reaffirmation Agreement.	
property	owes \$9,525.00		☐ Retain the property and [explain]:	
securing debt	:			
Part 2: List Y	our Unexpired Personal	Property Leases		
For any unexpire in the information	ed personal property lea on below. Do not list real	se that you listed estate leases. U	I in Schedule G: Executory Contracts and Unexpirence leases are leases that are still in effect; the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your u	unexpired personal prop	erty leases		Will the lease be assumed?
		·		
Lessor's name: Description of le	asad			□ No
Property:	aseu			☐ Yes
Lessor's name:				□ No
Description of le	ased			
Property:				☐ Yes
Lessor's name:				
Official Form 108	,	Statement of I	ntention for Individuals Filing Under Chapter 7	page 1

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Debt Debt		Joshua Scott King Allison Marie King			Case number (if known)	
	cription erty:	n of leased			□ No	
	•	ame: n of leased			□ No	
		ame: n of leased			□ No □ Yes	
Desc	or's n cription erty:	ame: n of leased			□ No □ Yes	
Desc Prop	erty:	n of leased			□ No □ Yes	
prope	r pen erty th	Sign Below alty of perjury, I declare that I have indicate nat is subject to an unexpired lease. oshua Scott King			any property of my estate that secures a debt and any personal s/ Allison Marie King	
Josh		nua Scott King ature of Debtor 1	^	Allison Marie King Signature of Debtor 2		
	Date	October 10, 2019	Da	ite	October 10, 2019	

Fill in this information to identify your case:	Check one box only as directed in this form and in Form
Debtor 1 Joshua Scott King	122A-1Supp:
Debtor 2 (Spouse, if filing) Allison Marie King	1. There is no presumption of abuse
United States Bankruptcy Court for the: District Case number	of Maine 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7 Means Test Calculation</i> (Official Form 122A-2).
(if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
	☐ Check if this is an amended filing
Official Form 122A - 1	
Chapter 7 Statement of You	ur Current Monthly Income 12/1
attach a separate sheet to this form. Include the line rease number (if known). If you believe that you are ex	ed people are filing together, both are equally responsible for being accurate. If more space is needed, number to which the additional information applies. On the top of any additional pages, write your name and empted from a presumption of abuse because you do not have primarily consumer debts or because of nt of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.
Part 1: Calculate Your Current Monthly Inc	ome
1. What is your marital and filing status? Ch	eck one only.
☐ Not married. Fill out Column A, lines 2-1	I.
■ Married and your spouse is filing with	you. Fill out both Columns A and B, lines 2-11.
☐ Married and your spouse is NOT filing	with you. You and your spouse are:
☐ Living in the same household and a	re not legally separated. Fill out both Columns A and B, lines 2-11.
	rated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under bouse are legally separated under nonbankruptcy law that applies or that you and your spouse are

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B

living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

					Debt	or 1	 or 2 or filing spouse
Your gross wages, salary, tips, be payroll deductions).	onuses, overtime, a	nd cor	mmissio	ons (before all	\$	4,734.00	\$ 2,105.00
Alimony and maintenance payments Column B is filled in.	ents. Do not include p	aymer	nts from	a spouse if	\$	0.00	\$ 0.00
All amounts from any source whof you or your dependents, inclusion from an unmarried partner, member and roommates. Include regular confilled in. Do not include payments y	ding child support. I rs of your household, ntributions from a spo	Include your d	e regular lepende	contributions nts, parents,	\$	0.00	\$ 0.00
5. Net income from operating a bus	iness, profession, o	r farm					
				tor 1			
Gross receipts (before all deduction	ns)	\$	0.00				
Ordinary and necessary operating	expenses	-\$	0.00				
Net monthly income from a busines	s, profession, or farm	ı \$	0.00	Copy here ->	\$	0.00	\$ 0.00
6. Net income from rental and othe	real property						
			Deb	tor 1			
Gross receipts (before all deduction	ns)	\$	0.00				
Ordinary and necessary operating	•	-\$	0.00				
Net monthly income from rental or	•	\$	0.00	Copy here ->	\$	0.00	\$ 0.00
7. Interest, dividends, and royalties					\$	0.00	\$ 0.00

12/15

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Debtor 1 Debtor 2	Joshua Scott King Allison Marie King				Case number	er (<i>if known</i>)			
					Column A Debtor 1		Column B Debtor 2 o non-filing		
8. U n	nemployment compensation				\$	0.00	\$	0.00	
the	o not enter the amount if you conter e Social Security Act. Instead, list it	here:							
	For you			0.00					
	For your spouse			0.00					
be	ension or retirement income. Do nefit under the Social Security Act.	•			\$	0.00	\$	0.00	
Do red do	come from all other sources not ont include any benefits received beived as a victim of a war crime, a mestic terrorism. If necessary, list cal below.	under the Social Sec crime against huma	curity Act or payments, or internation	ents al or					
					\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	Total amounts from separate	pages, if any.		+	\$	0.00	\$	0.00	
	alculate your total current monthl ch column. Then add the total for C			\$	4,734.00	+ \$_	2,105.00	= \$_	6,839.00
Part 2:	Determine Whether the Mean							incon	
12	a. Copy your total current monthly	income from line 11			Сор	y line 11	here=>	\$	6,839.00
	Multiply by 12 (the number of mo	onths in a year)							12
12	b. The result is your annual income	for this part of the fo	orm				12b	o. \$	82,068.00
13. Ca	alculate the median family income	e that applies to yo	u. Follow these st	eps:					
Fill	I in the state in which you live.		ME						
Fill	I in the number of people in your ho	ousehold.	4						
То	I in the median family income for your find a list of applicable median incurt this form. This list may also be ave	ome amounts, go on	line using the link	specified	in the separ	ate instru	. 13. ctions	\$	96,516.00
	ow do the lines compare?		,						
14	a. Line 12b is less than or e	equal to line 13. On t	he top of page 1,	check box	x 1, There is	no presur	nption of abus	se.	
14	Go to Part 3. b. Line 12b is more than lin Go to Part 3 and fill out F		age 1, check box	2, The pi	resumption o	f abuse is	determined b	y Form 1	22A-2.
Part 3:	Sign Below	OIIII IZZA Z.							
	By signing here, I declare under	penalty of periury the	at the information	on this st	atement and	in anv att	tachments is t	rue and o	correct.
		,				•			
	X /s/ Joshua Scott King Joshua Scott King		X		son Marie I Marie Kin				
_	Signature of Debtor 1		D	Ū	e of Debtor 2	2			
D	Oate October 10, 2019 MM / DD / YYYY		Date		er 10, 2019 O / YYYY				
	If you checked line 14a, do NOT	fill out or file Form 1	22A-2.		- /				
	If you checked line 14b, fill out F								

Debtor 1

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-20524 Doc 1 Filed 10/10/19 Entered 10/10/19 16:53:34 Desc Main Document Page 59 of 65

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of Maine

In	re	Joshua Scott King Allison Marie King		Case No.	
	-	7 miles i maile i milg	Debtor(s)	Chapter	7
		DISCLOSURE OF COMPE	NGATION OF ATTOD	NEV FOD DE	PRTOD(S)
1.	con	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 mpensation paid to me within one year before the filir rendered on behalf of the debtor(s) in contemplation of	ng of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
		For legal services, I have agreed to accept		\$	1,700.00
		Prior to the filing of this statement I have received.			1,700.00
		Balance Due		\$	0.00
2.	The	e source of the compensation paid to me was:			
		■ Debtor □ Other (specify):			
3.	The	e source of compensation to be paid to me is:			
		■ Debtor □ Other (specify):			
4.		I have not agreed to share the above-disclosed comp	pensation with any other person u	ınless they are meml	pers and associates of my law firm.
		I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the nar			
5.	In	return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects	of the bankruptcy c	ase, including:
	b. c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, stat Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to refer the secured creditors to refer the secured creditors to refer the secured creditors.	ement of affairs and plan which ors and confirmation hearing, an reduce to market value; exe	may be required; d any adjourned hear	rings thereof;
		reaffirmation agreements and application	ons as needed.		
6.	Ву	agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis any other adversary proceeding. Prepa of liens on household goods.	schargeability actions, judio	ial lien avoidance	es, relief from stay actions or SC 522(f)(2)(A) for avoidance
			CERTIFICATION		
this		ertify that the foregoing is a complete statement of an kruptcy proceeding.	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
_	Oct	ober 10, 2019	/s/ E. Chris L'Hom	medieu, Esq.	
	Date	2	E. Chris L'Homme Signature of Attorney		
			L'Hommedieu Lav		
			190 Bates Street Lewiston, ME 042	40	
			(207) 786-5244 Fa	ax: (207) 784-3472	
			Lewistonlawbky@ Name of law firm	yahoo.com	
			J J		

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United States Bankruptcy Court District of Maine

In re	Joshua Scott King Allison Marie King		Case No.	
		Debtor(s)	Chapter	7
	CERTI	IFICATION OF CREDITOR N	MATRIX	
	I hereby certify that the attached	d matrix, consisting of <u>5</u> pages	s, includes the	names and addresses of
all cre	ditors listed on the debtor's scheo	dules.		
Date:	October 10, 2019	/s/ E. Chris L'Hommedieu, Es	q.	
		3299		
		E. Chris L'Hommedieu, Esq. 8 L'Hommedieu Law Office	,	
		190 Bates Street Lewiston, ME 04240		

(207) 786-5244 Fax: (207) 784-3472

Advanced Collection Services PO Box 7103 Lewiston, ME 04243-7103

Androscoggin Savings Bank 30 Lisbon St Lewiston, ME 04240

Balanced Healthcare Receivables 164 Burke Street, Suite 201 Nashua, NH 03060

Beeline Cable TV Inc 131 Lakewood Road Madison, ME 04950

CENCAP FCU 443 Franklin Ave Hartford, CT 06114

Central Maine FCU 1000 Lisbon St Lewiston, ME 04240

Central Maine Power Company 83 Edison Drive Augusta, ME 04336-0001

Centrl Maine FCU 1000 Lisbon St Lewiston, ME 04240

Charter Communications 400 Atlantic St, 10th Fl Stamford, CT 06901 Community Clinical Services 60 Second Street, Suite 2 Auburn, ME 04210

Covenant Health 85 Prescott St, Ste 402 Worcester, MA 01605

Credit Protection PO Box 802068 Dallas, TX 75380-2068

Enhanced Recovery Corporation Attn: Bankruptcy 8014 Bayberry Road Jacksonville, FL 32256-7412

Family Eye Health & Contact Lens Center 220 Sabattus Street Lewiston, ME 04240

Gateway One Lending & Finance 175 North Riverview Drive Suite 100 Anaheim, CA 92808

Inland Family Care 16 Concourse West Waterville, ME 04901

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Kennebec Behavioral Health 67 Eustis Parkway Waterville, ME 04901

Keystone Management 99 Fisherville Road Concord, NH 03303

Kristine Gould 13 Maple Street Fryeburg, ME 04037

Law Offices of Carl R. Trynor, PA PO Box 4290 Portland, ME 04101

Maine Health
Patient Financial Services
PO Box 16021
Lewiston, ME 04243-9501

MaineGeneral Medical Center 10 Caldwell Road Augusta, ME 04330

Meredith Villiage 24 State Route 25 Meredith, NH 03253

National Credit Systems, Inc. Attn: Bankruptcy PO Box 312125 Atlanta, GA 31131

Navient Attn: Bankruptcy PO Box 9640 Wilkes-Barre, PA 18773

NH Northeast Credit Services, Inc. Attention: Bankruptcy 41 Simon Street, Suite 2a Nashua, NH 03063 Northern Radiology Associates 489 State Street Bangor, ME 04401

Office of the US Attorney 100 Middle Street E Tower, 6th Fl. Portland, ME 04101

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502

Receivables Performance Management 20818 44th Avenue West, Suite 140 Lynnwood, WA 98036

Redington-Fairview General Hospital 46 Fariview Avenue PO Box 468 Skowhegan, ME 04976

Sandcastle Clinical & LA Hearing Center 72 Strawberry Avenue Lewiston, ME 04240

Solomon and Solomon PC 5 Columbia Circle Albany, NY 12203

Spurwink Services 901A Washington Ave Portland, ME 04103

St. Mary's Health System PO Box 291 Lewiston, ME 04243-0291

St. Mary's Regional Medical Center PO Box 291 Lewiston, ME 04243-0291

The Thomas Agency PO Box 6759 Portland, ME 04103

U.S. Department of Education Ecmc/Bankruptcy PO Box 16408 Saint Paul, MN 55116

US Cellular Corp. Attn: Write Off Department PO Box 7835 Madison, WI 53707-7835

Waterville Pediatrics 295 C Kennedy Memorial Dr Waterville, ME 04901

YMCA 62 Turner Street Auburn, ME 04210